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Practitioner's Docket No. MPI00-368P1RCN1M
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PATENT

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Submitted herewith:

Supplemental Preliminary Amendment Transmittal (2 pages—in duplicate)

Supplemental Preliminary Amendment (3 pages)

Total

Pages (8 pages)
(Including this cover sheet)

TO/SB/97 (08-00)

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OFFICIAL

Practitioner's Docket No. MPI00-368P1RCN1M**PATENT****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: Glucksmann, Maria A., et al
Application No.: 10/665,956 Group No.:
Filed: September 18, 2003 Examiner:
For: 57242, A NOVEL HUMAN G PROTEIN-COUPLED RECEPTOR FAMILY
MEMBER AND USES THEREOF

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SUPPLEMENTAL PRELIMINARY AMENDMENT TRANSMITTAL

1. Transmitted herewith for this application is/are:
a. This Supplemental Preliminary Amendment Transmittal (2 pages - in duplicate); and
b. Supplemental Preliminary Amendment (3 pages).

STATUS

2. Applicant is other than a small entity.

PETITION FOR EXTENSION OF TIME

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)(1)-(3)) for a _____ month extension:

Fee: \$ 0.00

CERTIFICATION UNDER 37 C.F.R. SECTIONS 1.8(a) and 1.10*

I hereby certify that, on the date shown below, this correspondence is being:

MAILING

- ☐ deposited with the United States Postal Service in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

37 C.F.R. SECTION 1.8(a)

37 C.F.R. SECTION 1.10*

- ☐ with sufficient postage as first class mail.

- ☐ as "Express Mail Post Office to Addressee"
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Date: November 21, 2003

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Practitioner's Docket No. MP100-368P1RCN1M

Extension fee due with this request \$ 0.00

If an additional extension of time is required, please consider this a petition therefor.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1)		(Col. 2)		(Col. 3)	OTHER THAN A SMALL ENTITY		
	Claims Remaining After Amendment		Highest No. Previously Paid For		Present Extra		Rate	Addit. Fee
Total	0	Minus	0	=	0		\$18.00 =	\$0.00
Indep.	0	Minus	0	=	0		\$86.00 =	\$0.00
First Presentation of Multiple Dependent Claims			0				\$290.00 =	\$0.00
							Total Addit. Fee	\$0.00

Total additional fee for claims required \$0.00

FEE PAYMENT

5. Charge Account No. 501668 the sum of \$0.00 (which includes the \$0.00 extension fee and the \$0.00 additional fee for claims). A duplicate of this transmittal is attached.

FEE DEFICIENCY

6. If any additional extension and/or fee is required, charge Account No. 501668.
If any additional fee for claims is required, charge Account No. 501668.

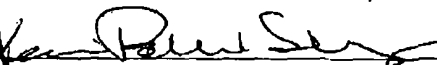
7. Correspondence Address
Direct all future correspondence to:

Customer Number 30405
OR
Intellectual Property Department
MILLENNIUM PHARMACEUTICALS, INC.
75 Sidney Street
Cambridge, MA 02139

November 21, 2003

MILLENNIUM PHARMACEUTICALS, INC.

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